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FOREIGN DEPARTMENT

IN CHARGE OF
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ORGANIZATION NOTES

A GENERAL ASSOCIATION OF TRAINED NURSES IN GERMANY

AN observation made several years ago—that the nurses of Germany were nearly all in religious sisterhoods and that it was almost unheard of for them to speak or write on subjects pertaining to their profession, and that organization as we have it was unknown among them—no longer holds good. Within the last few years a great change has been coming over the conditions of life for trained nurses in Germany—a change inevitable with the rapid movement of masses of women towards self-support, and now recognized and accepted by the nurses themselves. *Die Krankenpflege*, a journal devoted to nursing interests, has an extremely interesting article by Agnes Karli giving a history of the forming of a thoroughly modern, independent organization of nurses called the “Association of Professional Nurses of Germany,” which was founded on January 11 last, with headquarters in Berlin.

The article says: “The need of an organization for the hundreds of sisters who had withdrawn from the existing orders (viz., those based upon the religious sisterhood system) has been widely realized in the last few years. Though many nurses felt this need, yet the pressure and exigencies of their work allowed only one here and there to speak out upon this subject, but at the meeting of the Council of Women of Germany it was first openly urged by the widow of Professor Krukenberg-Cowze, and the two hundred and thirty representatives of eighty thousand German women definitely asserted their opinion that nursing should be looked upon as a skilled pursuit for women who desired industrial freedom, in opposition to the conservative view that it must either be monopolized by religious or charitable bodies or left to ignorant persons.”

Agnes Karli defends energetically the new order of “free” nurses against the reproaches of the older and submissive ideas, and says: “Undeveloped and timid women will do better to remain in the Deaconess or Red Cross orders, where they never have to think for themselves, but it is useless to blind oneself to the rapidly changing conditions of to-day. It is of the first importance to make it possible for all women to find that work which is congenial to them, and numberless women who are eager to devote themselves to some form of service to their fellow-men find the limitations of the Deaconess and Red Cross Sisterhoods too narrow.

“Above all things we wish in our organization to preserve personal freedom and self-government on a rational basis.”

The association has for objects the advancement of every interest pertaining to nurses, including a directory, a bureau for positions wanted or offered, information and advice to nurses, sick benefit funds, and so on.

The organization provides for affiliated groups in all parts of Germany and also among German nurses elsewhere.

Another article in the same journal by Elsbeth Krukenberg is called "The Reform of the Conditions of Nursing," and Agnes Karli contributes still another on "The Necessity of Provision for Old Age for the Nurse."

These papers, which are well worth translating if space allowed, discuss most earnestly and courageously the rightful discontent and the terrible overworking through long hours, and the often evaded responsibility of the religious houses in the care of aged sisters.

LETTERS

LETTER FROM CAIRO

SHARIA, KASR-EL-NIL, CAIRO, EGYPT.

. . . As the new Anglo-American hospital is about to be advertised in England, America, and Egypt, a slight account of it may prove of interest.

The hospital, which is in process of building, is a short distance from the Kasr-el-Nil bridge, in a beautiful locality,—the Nile on one side and a tributary on the other,—while to the front are the grounds of the Kedivial Sporting Club, with golf links, tennis courts, croquet grounds, and polo. Overlooking these is the Ghezireh Palace, now used as a high-class hotel, with its beautiful grounds, luxuriant and gay with tropical plants and flowers interspersed with statuary. In the opposite direction the electric tram runs from the bridge to the Pyramids, which are seven miles out, completely surrounded by desert, with the everlasting Sphinx. These are best seen by moonlight, and many trips and parties are made up to visit them in the full of the moon. I have been there while the Nile was high, when earth and sky blend into glorious shades and cast exquisite tints on the water.

The inhabitants are very varied, consisting of Arabs, Berbers, Greeks, Copts, Syrians, and what is termed the Fellaheen, countrymen or agriculturists. The style of dress is very simple. The Fellaheen men and women alike wear an undergarment of nondescript pattern and a garribiya, the latter like a plain nightgown with open chest; children wear the garribiya only, and occasionally when arrested it is comical to see them slip out of the garment and run away naked, the policeman left with one or two empty garribiyas, looking quite like a picture for *Punch*. The women wear a face-covering called a yashmack, with just the eyes visible. The roads are very bad for pedestrians, but driving is cheap and the aribiya (carriage) is invariably drawn by a pair. Closed carriages are only used by ladies of the harem (hareem), and are called hareem carriages. The Zoölogical Gardens are considered almost the prettiest in the world, situated in Gizeh, two and a half miles by electric car from Kasr-el-Nil Bridge. There are other short trips to the Barrage, the ostrich farm, etc., then there are the mosques, palaces, and the Citadel, which is famous for the Mameluke's leap and other historical events, and the Museum, which is stored with ancient, mediæval, and modern Egyptian history for some seven thousand years.

There is very little to be said about the hospital as yet. It was built through subscription for a Queen Victoria Memorial, Sir Earnest Cassell being a very generous donor (as he is to most worthy charities) and President Roosevelt one of the patrons. It is not a large building, being intended to accommodate English and Americans, but I believe that under certain conditions natives will be admitted. The management, staff, etc., will be pretty much after the manner

of the Women's Hospital in Manila. The salary will scarcely tempt American nurses, but second-class return expenses will be paid. The servants must be natives, for even the most clever housekeeper (European) cannot do shopping in the bazaars, as that particular part of Cairo is completely Arab, and the Arab nature is a complete network of bargaining, cheating, and lying, yet he is the most interesting, simple, and happy individual created. Of course, at first it is very difficult to make oneself understood, as it takes some time to remember that *êsh* means bread; *zebda*, butter; *lebban*, milk; *bêd*, egg; *fiḡān*, cup or bowl; *sekkīn*, knife; *shōka*, fork; *foota*, napkin, towel, or tablecloth; *siniya*, tray; *soffragy*, waiter; *lamurgy*, male-nurse; *arbāgy*, coachman, etc. As there is no spelling or reading (simply phonetic), it is a difficult language to learn and can only be taught by a native; *f* is pronounced as *ee* and *ai* as *i*; Port Said, for instance, is pronounced *Side*, and *ê* like *eh*.

As far as I can judge, nurses do not hold a very high standing in Cairo. As compared with other places, there is decidedly less respect shown towards the nursing profession, and the sentiments expressed by one or two doctors on nurses generally was quite a surprise to me. Whether the fault lies with the nurses themselves or with the doctors for failing to see that the nurse is accorded the courtesy due to her professional ability I am unable to judge; probably there are faults on both sides. I consider nursing homes, both in England and elsewhere, very disastrous to the standard of nursing. Either a private party or a company start a nursing home, which they usually transform into a huge money-making scheme, paying the nurses between twelve dollars and a half and thirteen dollars per month. Many nursing homes get all kinds and classes of nurses on their staff, some with a year's training, some with no training at all save the London Obstetrical Society certificate. Nurses who could not by any remote possibility stand on their own legs (so to speak) find a permanent though cheap post in a nursing home. Of course, there are also many first-class and very excellent nurses to be found in a home, probably brought there through misfortune, as it is very difficult for individual nurses to make a living while doctors claim that at any time they can get some kind of a nurse from this or that staff. It seems to me that this system will only tend to bring the nursing profession gradually though surely down the social scale. For my part, I have tried a temporary post in three nursing homes and am equally disgusted with all. Doing private practice is more conducive to respect and keeps the profession from being overcrowded with women who only bring discredit on us. . . .

The trip to Cairo is delightful. I came by the *Norddeutscher Lloyd* and stopped two days in Genoa. . . The scenery through the Straits of Messina is perfectly exquisite, the most beautiful of the whole trip. . . . While waiting at Ismailia on no account take lunch or dinner, lest you regret both the price and quality.

. . . Hotel life is rather expensive. The Savoy is royal; Shephard's, the Savoy, and the Ghezireh Palace are wealthy Americanized hotels; next comes the Grand Continental. The Angleterra is very popular without ostentation: it has comfort with less expense. Mena House and the hotels in Helonan are decidedly health resorts, and during the season keep a resident nurse. Helonan is the present-day fashionable health resort: with its pure desert air, sulphur and electric baths, and short distance from Cairo it is likely to hold its own for some time to come. . . . Europeans who are obliged to remain here over the summer generally camp out on the desert during the two hottest months, and amuse themselves with lounging around or digging for beads and other relics.

ITEMS

HOURLY NURSING IN ENGLAND

THE Marylebone Daily Visiting Nursing Association has the excellent object of providing a visiting nurse to attend paying patients in the district of Marylebone by the hour. It is unquestionable that the services of such a nurse are of great value, and probably the only reason why nurses have not taken up this kind of work more extensively is that without a backing, such as is afforded by a society, it is somewhat precarious as a means of livelihood. The Marylebone district, where there are so many flats and small houses, seems exceptionally well fitted for the experiment, for the visiting nurse in this country has scarcely yet passed the experimental stage, and we wish it all success.

"LIVING WAGE OF THE DISTRICT NURSE"

Nursing Notes says: "We are glad to see that the 'Living Wage of the District Nurse' was the subject of a recent article in a contemporary, for it is one which much needs ventilation. It is only necessary to study the columns of advertisements in any paper to see how the rage for cheapness has spread through the length and breadth of the land, and that really well-meaning philanthropists are amongst the greatest sinners in this respect as regards the sweating of the district nurse. There are some good people who seem to think that by securing a nurse at a pittance which is emphatically not a living wage they are providing for the parish needs and doing the right thing all round. It is left-handed charity, this, with a vengeance, for it is undoubtedly true that the under-paid nurse is either inefficient, and therefore unable to obtain better-paid work, or she is wrongly attempting to maintain herself on a yearly sum which cannot provide for her reasonable needs at a standard compatible with health and comfort. It is no kinder to the patients than to the nurse to expect the latter to live and work at a salary which is not sufficient for proper food and clothing, leaving saving or recreation out of the question."

